

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Farrell For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Democratic State Central Committee of Connecticut	<b>Transaction ID:</b> D146525 <b>Date of Disbursement</b>
Mailing Address 380 Franklin Avenue	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 6 / 2 0 0 8</div> </div>
City Hartford State CT Zip Code 06114	Amount of Each Disbursement this Period
Purpose of Disbursement Donation Candidate Name <div>012</div> Category/ Type	<div>2500.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼ State: District:	
<b>B.</b> Full Name (Last, First, Middle Initial) FCCF Fund for Women and Children	<b>Transaction ID:</b> D146526 <b>Date of Disbursement</b>
Mailing Address 523 Danbury Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 6 / 2 0 0 8</div> </div>
City Wilton State CT Zip Code 06897-2233	Amount of Each Disbursement this Period
Purpose of Disbursement Donation Candidate Name <div>012</div> Category/ Type	<div>250.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼ State: District:	
<b>C.</b> Full Name (Last, First, Middle Initial) Hillary Clinton for President	<b>Transaction ID:</b> D144461 <b>Date of Disbursement</b>
Mailing Address 4420 North Fairfax Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 8</div> </div>
City Arlington State VA Zip Code 22203	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Candidate Name Ms Hillary Clinton <div>012</div> Category/ Type	<div>2300.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼ State: District:	

**SUBTOTAL** of Disbursements This Page (optional) .....

**5050.00**

**TOTAL** This Period (last page this line number only) .....